



# Module 2

August 2022

# Provisional Outline of Scope

## **(subject to submissions from Core Participants and Counsel to the Inquiry)**

This module will look at, and make recommendations upon, the UK's core political and administrative decision-making in relation to the Covid-19 pandemic between early January 2020 until February 2022, when the remaining Covid restrictions were lifted. It will pay particular scrutiny to the decisions taken by the Prime Minister and the Cabinet, as advised by the Civil Service, senior political, scientific and medical advisers, and relevant Cabinet sub-committees, between early January and late March 2020, when the first national lockdown was imposed.

Module 2 will examine:

1. The central government structures and bodies concerned with the UK response to the pandemic and their relationships and communications with the devolved administrations in Scotland, Wales and Northern Ireland and regional and local authorities.
2. The initial understanding of, and response to, the nature and spread of Covid-19 in light of information received from the World Health Organization and other relevant international and national bodies, advice from scientific, medical and other advisers and the response of other countries. This will include the government's initial strategies relating to community testing, surveillance, the movement from 'contain' to 'delay' and guidance and advice to health and social care providers.
3. The decision-making relating to the imposition of UK-wide and, later, England-wide non-pharmaceutical interventions (NPIs), including the national lockdowns in March-July 2020, November-December 2020 and January-April 2021, local and regional restrictions, circuit breakers, working from home, reduction of person to person contact, social-distancing, the use of face-coverings and border controls; the timeliness and reasonableness of such NPIs, including the likely effects

had decisions to intervene been taken earlier, or differently; the development of the approach to NPIs in light of the understanding of their impact on transmission, infection and death; the identification of at risk and other vulnerable groups and the assessment of the likely impact of the contemplated NPIs on such groups in light of existing inequalities.

4. Access to and use in decision-making of medical and scientific expertise, data collection and modelling relating to the spread of the virus, including the measuring and understanding of transmission, infection, mutation, re-infection and death rates; the certificate system and excess mortality; the relationship between and operation of systems for the collection, modelling and dissemination of data between government departments and between the government, the NHS and the care sector.
5. Public health communications in relation to steps being taken to control the spread of the virus; transparency of government messaging; the use of behavioural management and the maintenance of public confidence in the UK government, including the impact of alleged breaches of rules and standards by Ministers, officials and advisers.
6. The public health and coronavirus legislation and regulations that were proposed and enacted: their proportionality and enforcement.



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